OPERATIONAL MEMO

TITLE:	UPDATED HCBS PROVIDER RETAINER PAYMENTS AND CASE MANAGEMENT ACTION REQUIRED FOR CLOSURES RELATED TO COVID-19
SUPERSEDES NUMBER:	**HCPF IM 20-017 & HCPF OM 20-021**
EFFECTIVE DATE:	**MARCH 13, 2020**
DIVISION AND OFFICE:	**BENEFITS AND SERVICES MANAGEMENT DIVISION & CASE MANAGEMENT AND QUALITY PERFORMANCE DIVISION, OFFICE OF COMMUNITY LIVING**
PROGRAM AREA:	**CASE MANAGEMENT AGENCIES, HCBS WAIVERS**
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Purpose and Audience:

The purpose of this Operational Memo is to update Home and Community-Based Services (HCBS) Providers and Case Management Agencies (CMAs) that retainer payments are now allowed for employment services offered through the Developmental Disabilities (DD) and Supported Living Services (SLS) waivers.

PLEASE NOTE: This memo also provides guidance to providers on adjusting claims submitted to date for retainer payments, as well as instructions on how to bill services going forward. These actions must be taken in order to receive retainer payments.

Information:

For dates of service beginning March 13, 2020, providers delivering the following HCBS services may utilize service delivery alternatives or bill authorized retainer payments

when services are no longer able to be rendered due to health concerns related to the COVID-19 pandemic (see below for process):

- Adult Day Services
- Day Habilitation
- Day Treatment for the Brain Injury Waiver
- ***Prevocational Services***
- ***Supported Employment***

Service Providers are allowed and encouraged to continue to provide services in alternative locations and/or use technology to ensure continuity of service to meet the member's needs.

1. Services may be provided via technology solutions. This may include providing day program and day habilitation services via video technology.
2. Services may be provided in alternative locations and/or in smaller settings.
3. Any change to the delivery of service must be in accordance with the member's needs and preferences and documented by the case manager.

Action Needed: Any provider agency temporarily suspending or reducing services must immediately notify the Department, members, and the members' case management agency (CMA). Provider agencies shall notify the Department by email at HCPF_HCBS_Questions@state.co.us.

Notes about retainer payments:

- Retainer payments may **only** be billed when authorized and documented by case managers via log note in the member's file within the case management system, the Benefits Utilization System (BUS).
- Retainer payments are received by billing for units authorized in a member's service plan, but not provided due to the COVID-19 pandemic.
- Units billed shall not exceed the amount, scope, and duration otherwise authorized for the Service provider.
- Retainer payments may **not** be billed when the member chooses to receive the service from a different service provider or alternative services in lieu of services identified above.

Provider Actions for Retainer Payments:

- Provider agencies shall notify the member and their case manager within 24 hours of the decision to suspend or reduce services by phone or email.

- Providers must document the date/time of the phone call or email and who at the agency provided the notice.
- All notifications must be documented, and all documentation must be maintained within the member file and provided to the Department or Department's agent upon request.
- Provider agencies shall notify the Department by email at HCPF_HCBS_Questions@state.co.us.
- Provider agencies must wait to bill retainer payments until permission is given by the member and payments are authorized by the Case Management Agency.

- Billing Procedures:
    - o All providers authorized to bill retainer payments will continue to bill for services that were prior authorized on the member's service plan.
    - o For retainer payments in which claims have already been submitted and paid, please complete the following steps:
        - ▪ Identify claims that include lines for which retainer payments were billed.
        - ▪ Access the Provider Portal, select the claims on which a retainer payment was billed, and use the Adjust/Void/Copy button on the bottom to **void the line for which services were rendered, only if rendered services and retainer payments we billed on the same claim.**
        - ▪ You will then need to use Adjust/Void/Copy button on the bottom to adjust the retainer payment line. On the adjusted claim, add one unit of the service code T2034 without a modifier for the same dates of service as the retainer payment service. This will allow the Department to track claims for retainer payments.
        - ▪ Before submitting, be sure you have removed any lines on the adjusted claim for services that were not billed as retainer payments.
        - ▪ Submit a separate, new claim for the rendered service that was voided.
        - ▪ If the claim with the previously billed retainer payment has been suspended, the claim will need to be voided and rebilled, with the new code of T2034 included on the claim. Should lines on the suspended claim have been billed for services delivered conventionally or virtually, a separate claim will need to be submitted.

- Providers can follow the detailed instructions provided in this [Quick Guide on how to "Copy, Adjust, or Void a Claim."](#) If providers are unable to void the claims and need assistance, please contact the DXC call center at 1-(844)-235-2387 with the following information:
  - Specify Provider ID, Client ID, and Dates of Service or ICNs.
- For all future claims for retainer payments, please complete the following steps:
  - Providers must separate claim lines billed for Retainer Payments from claim lines for services delivered remotely or via conventional methods.
  - Providers must add one unit of procedure code T2034 to claims that include lines being billed as retainer payments. This will indicate the claim is a retainer payment.
  - If any of the services listed above are included on a claim with procedure code T2034, they will be assumed to be Retainer Payments.
  - Bill services provided either remotely or rendered in a conventional manner, on their own separate claim.

Case Management Actions to Authorize Retainer Payments:

- Each CMA, when notified of an agency suspension or closure, must contact the impacted member as soon as possible to review alternative benefits and services to meet the member's support needs.
- When in contact with members, the CMA must work to identify any other potential changes that may be needed to the member's services and supports.
- Case Managers are to enter a log note in the Benefits Utilization System, documenting:
  - Contact with the member or member designated contact;
  - Services reviewed;
  - Determination of service changes or natural supports to meet the member's needs; and
  - Member's approval or disapproval of retainer payments for the provider.
- If no changes in supports are identified after reaching out to the member, and the member approves of the provider billing retainer payments, the case manager will notify the provider that they may bill retainer payments.

Questions regarding this guidance can be sent to HCPF_HCBS_Questions@state.co.us

GENERAL FINDINGS

Background on COVID-19: COVID-19 is the disease caused by novel Coronavirus virus 2019 that first emerged in Wuhan, Hubei Province, China. COVID-19 is a respiratory illness that can spread from person to person through respiratory droplets.

The situation with this outbreak is evolving rapidly with new information being learned daily. The Centers for Disease Control and Prevention (CDC) is working closely with federal, state, and local health departments. We will issue additional guidance as it is available. The document is current with CDC guidance as of 3/12/20. Visit the CDC website for the latest updates:

https://www.cdc.gov/coronavirus/2019-nCoV/index.html

How it Spreads: The coronavirus is thought to spread mainly from person to person, between people who are in close contact with each other (defined as within about six feet), and through respiratory droplets produced when an infected person coughs or sneezes. These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.

It may be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes, but this is not thought to be the main way the virus spreads. Learn more about how COVID-19 spreads.

Symptoms: The main symptoms are fever, coughing, and shortness of breath, just like the flu. Currently, CDC believes that symptoms may appear in as few as two days or as long as 14 days after exposure. There is no reliable way to distinguish coronavirus symptoms from symptoms caused by the common flu, as both diseases can cause fever, coughs, and pneumonia in severe cases. A doctor may consider a flu test first, unless the person has been in close contact with someone who tested positive for COVID-I9. Close contact is within six feet of someone for a prolonged period, such as through caring for, visiting, or sharing a room with someone who has the virus and being coughed on.

Treatment: Currently, there are no vaccines or antiviral medications to prevent or cure COVID-19, however scientists are currently working on both. Comfort measures should be provided to help relieve symptoms.

Steps to Prevent COVID-19 Include:

- **Handwashing**: Reinforce with your participants, staff, and visitors best practices for handwashing:

  - Wash your hands often with soap and water for at least 20 seconds, especially after going to the bathroom; before eating; and after blowing your nose, coughing, or sneezing.

  - If soap and water are not readily available, use a hand sanitizer that contains *at least* 60% alcohol.

  - Always wash your hands with soap and water if your hands are visibly dirty.

  - Remind your staff to be extra vigilant when cleaning, performing housekeeping, and preparing food.

- **Follow cough, sneeze and distance etiquette:** Avoid touching your eyes, nose, and mouth. This makes it more difficult for the virus to get from a surface to you. Cover coughs and sneezes with a tissue, then dispose of it immediately in a trash can, preferably one with a touchless lid opener.

- **Cleaning**: Frequently clean commonly touched surfaces and objects daily, like tables, countertops, light switches, doorknobs, elevator buttons, phones, handrails, cabinet handles and other surfaces using cleaning products according to the manufacturer's instructions. Residents in their own apartments or homes can use the same cleaners or wipes in their residences as they usually do. The EPA has posted a list of antimicrobial products registered for use against the virus.

- **Add more cleaning stations**: Station hand wipes or alcohol-based hand sanitizer in common assembly areas, such as living areas, exercise areas, game rooms, lobbies, and living areas. Consider putting a bottle on all the dining room tables. Provide visual alerts providing instruction on hand hygiene, respiratory hygiene and cough etiquette. Provide a cleaning station with alcohol-based hand sanitizer, tissues, and a trash can for persons entering your building. Step up your infection control. These preventive measures may help avert an outbreak or spread of COVID-19 as well as other illnesses. Review these important steps.

- **Post signs at entrances instructing visitors not to visit** if they have (1) fever or symptoms of a respiratory infection (e.g., cough, sore throat, or shortness of breath), (2) International travel within the last 14 days, or (3) contact with an individual with COVID-19. Consider having visitors sign visitor logs in case contact tracing becomes necessary.

- [Monitor your staff and manage health care workers with symptoms of respiratory illness](). Implement sick leave policies that are non-punitive, flexible, and consistent with public health policies that allow ill Health Care Professionals (HCP) to stay home. As part of routine practice, ask your staff (including consultant personnel) to regularly monitor themselves for fever and symptoms of respiratory infection. Remind staff to stay home when they are ill. If a staff member develops fever or symptoms of respiratory infection while at work, they should immediately put on a facemask, inform their supervisor, and leave the workplace.

Communicate and Stay Informed: Communicating with your participants and participants' families, staff and visitors is critical. The more you communicate, the less likely they are to be stressed and speculate. Participants, families, and staff may still come to you with concerns based on misinformation. Rumors can spread like wildfire and incorrect information can do a lot of damage. Refer them to credible information such as the CDC website or the [CDPHE website]().

1. **Reassure participants.** If participants express concern, listening and validating concerns before offering advice or tips on precautions can help people through this process. If participants ask about face masks, explain the CDC does not advise people to use face masks unless they are advised to do so by their health care provider or public health official.

2. **Reassure families**. Let families know that you have a plan and inform them of precautions being taken in your facility/office to protect their loved ones (and them), including visitor restrictions and actions participants and families can take to protect themselves in the center.

3. **Educate** participants, family members and visitors about prevention practices, responses, and precautions implemented within the community to protect them and their loved ones, and actions they can take to protect themselves in their residence. [Share the latest information about COVID-2019]().

4. **Post educational materials** about COVID-19 that explain why infection control precautions are necessary.

5. **Train**. Hold staff training on sources of exposure, prevention, recognizing symptoms, response when an outbreak has been identified, and communication protocols. Make sure staff get the message to monitor and report any symptoms they or the participants have, and that all managers on duty know how to contact your local or state public health department if concerns arise.

6. **Communicate with your staff**. Review policies on sick leave and time off. Tell staff to speak up and stay home if they are not feeling well. You may want to check in at the beginning of work shifts to ask how staff are feeling. This applies

to any temporary, on-call employment services and third-party health care providers as well. Review policies with the agency and in person when any other worker arrives. Keeping an infectious disease out of the community is worth the time.

If you suspect someone in your facility/office may have COVID-19:

[If a participant exhibits symptoms associated with the coronavirus](#), take the following steps:

- **Place the person in a private room with a closed door.** Wait for guidance from the health department. Minimize the number of people who enter the room; ideally ONE healthcare person should be assigned or dedicated to working with that participant. This minimizes the risk of transmission to other participants and staff.

- **Notify your local public health department or contact your state health department**. Contact the Colorado Department of Public Health & Environment Call Center at 303-692-2700.

- **Follow HIPAA guidelines** and protect the confidentiality of the individual wherever possible.

- **Wear appropriate Personal Protective Equipment** during close contact with someone in your community that may have COVID-19. Follow health department guidance and [check this CDC page to prepare](#). Currently, the CDC recommends standard, contact and droplet precautions, and using (1) facemasks, (2) gowns; (3) gloves, and (4) eye protection. If you do not have this equipment, check with neighboring health facilities or contact your local health department if you are experiencing shortages. [The CDC has a plan in place to mitigate shortages](#)

- **If a physician recommends transport to a hospital** or treatment center, notify the hospital in advance that the person you're bringing may be suspect of having COVID-19 so they can get their infection prevention plan into action. Similarly, notify EMS or an ambulance service in advance that the person they are transporting may be suspect of having COVID-19 so EMS personnel can be prepared.

- **Clean the room, disinfect surfaces and any equipment** you used on the suspected participant before using it again.

Be Prepared:

1. **Update** emergency and outbreak plans, and practice or reinforce uncertain areas.

2. **Learn more about** how healthcare facilities can **Prepare for Community Transmission.**

3. **Review security practices**: Go over or create new visitor policies for changing circumstances. You may need to ask participants, staff, and family about travel or exposure to persons with COVID-19. Establish a single entrance to the community. Travel advisories are changing, but generally, you'll want to ask about any travel in the past 30 days as well as any planned travel by participants. The CDC has **travel advisory guidelines** that list the changing levels of restrictions.

4. **Talk with suppliers & vendors** asking if they have any COVI-19 plans in place. If this is not already part of your emergency plan, sketch out a scenario of what you'd do if they couldn't enter your community and act as needed to prevent that outcome.

5. **Routinely review and follow the guidance of your local and state health departments**. This is the communication most critical to health. Viruses appear in clusters, so they're best fought on the local level. Follow protocols given for state and local jurisdictions.

6. **Check supplies** of tissues, touchless trash cans, hand sanitizer, soap, gloves, food, linens, and personal protective equipment.

7. **Keep working on the basics of infection prevention**.

8. **Check your staff's level of cross training and develop plans for staffing shortages.** This may occur when transmission in the community is identified.

9. **Review and update your communication plans**. Identify who on your staff will be a spokesperson for your center if you are contacted by a member of the media. Ensure that all staff are aware of who this is and how to reach them.

10. **Protect your employees**. As you work to protect participants and employees, staying in compliance with employment law is important. Consult the CDC Guidance for Business and Employers and OSHA guidance for preventing workplace exposure.
    - Review The U.S. Equal Employment Opportunity Commission's Americans with Disabilities Act Pandemic Preparedness Guidance, and the OSHA pandemic factsheet.

- o An outbreak could also trigger policies around the Fair Labor Standards Act and the Family Medical Leave Act. The [Society for Human Resources Management, SHRM,](#) has a coronavirus FAQ page that can help.

11. Explore alternatives to face-to-face triage and physician visits.

12. **Review best practices for social distancing.**

    - o Group activities/services would need to stop.
    - o Practice social distance by keeping about six feet between yourself and anyone coughing or sneezing.

13. **Follow the guidance** issued by state and local health departments.

14. **Review medication management processes for emergencies**. Follow policy for medications in a congregate care environment as you would for the flu.

15. **Have a plan for suspending prospective participant tours and limiting new admissions in the event of an outbreak in your community**.

Additional References for this document & Resource Links

- [Recommendations for Long-Term Care Facilities](#) (CDC)

- [Steps Healthcare Facilities Can Take Now to Prepare for Coronavirus Disease 2019 (COVID-19)](#) (CDC)

- [FAQS for Healthcare Providers Regarding Medicare Billing and Payment](#) (CMS)

- [Coronavirus Preparation and Response Toolkit](#) (Argentum)

- [Interim Health Care Infection Prevention and Control Recommendations for Patients Under Investigation for Coronavirus Disease 2019 (COVID-19)](#) (CDC)

- [Handwashing Video](#) (Ecolab)

- [Information Regarding COVID-19](#) AHCA/NCAL (American Health Care Association / National Center for Assisted Living)

- [Handwashing 101](#) (ServSafe)

Follow the [CDC website](#) to keep up with the general trends and what's happening. Communicating with your [state health department](#) and watching local news will help you with specifics.

Attachment(s):

None

Department Contact:

HCPF_HCBS_Questions@state.co.us

Department COVID-19 Webpage:

https://www.colorado.gov/pacific/hcpf/COVID

For specific information, please call the CDPHE Call Center at 303-692-2700.
For general questions about COVID-19: Call CO-Help at 303-389-1687 or
1-877-462-2911 or email COHELP@RMPDC.org, for answers in English and Spanish
(Español), Mandarin (普通话), and more.